



**STATE OF MISSOURI**

MISSOURI BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS, PROFESSIONAL  
LAND SURVEYORS AND PROFESSIONAL LANDSCAPE ARCHITECTS

**INSTRUCTIONS FOR PREPARING A PROFESSIONAL LANDSCAPE  
ARCHITECTURE APPLICATION WITH A CLARB COUNCIL RECORD**

3605 MISSOURI BLVD, SUITE 380  
JEFFERSON CITY, MISSOURI 65109  
TELEPHONE: 573/751-0047  
FAX: 573/751-8046

**PLEASE READ CAREFULLY**

Before beginning to prepare your application, read it through part by part, including the affidavit, and be sure that you understand each part before typing in the information required.

**PLEASE NOTE THAT ALL INFORMATION ON THE APPLICATION MUST BE TYPEWRITTEN.**

**Required: Pursuant to Board Rule 20 CSR 2030-5.160, Applicants shall submit proof of receiving a passing score of 80% on the required State Exam covering Chapter 327, RSMo, the Board Rules and Ethics. To take this exam, please click here: <https://pr.mo.gov/apelsla-exam.asp>. In addition, proof of your passing score must be included with the application.**

We do not accept applications by fax or e-mail.

Having completed the entire application form and affidavit, check to see if you have signed your name in all spaces required, then mail your application, with fee to: Missouri Board for Professional Landscape Architects, 3605 Missouri Boulevard, Suite 380, Jefferson City, MO 65109.

**Failure to include all documents and information required, or failure to follow instructions in filling out your application, will result in the return of your application WITHOUT processing.**

It is your responsibility to keep a copy of the application for your files.

An application pending review will be retained for a period of one year from the date it was originally filed.

CLARB records are retained for a period of one year from the date of receipt.

Completed applications are processed in the order of receipt in as timely a manner as possible. Processing time varies depending on the volume of applications awaiting review and a specific licensure date cannot be projected.

If licensure is granted, your initial license will be valid until December 31 of the current year. Refer to statute 327.621 RSMo as well as Board Rules **20 CSR 2030-11.010** and **20 CSR 2030-11.035** regarding renewal of your license.

## **SOCIAL SECURITY NUMBER DISCLOSURE NOTICE**

**You must provide your social security number pursuant to state and federal law.**

**If you fail or refuse to provide your social security number, we will consider your initial application incomplete and return it to you. Continued failure or refusal to provide your social security number is grounds for denial of your application.**

Pursuant to state and federal law, licensing authorities must assemble your social security number with other relevant information (name, address, etc.) and transmit the data to the Division of Child Support Enforcement of the Department of Social Services to be used in a database for the following purposes:

- (1) locating individuals who are under an obligation to pay child support or provide child custody or visitation rights, against whom such an obligation is sought or to whom such an obligation is owed;
- (2) identifying whether an individual who owes overdue child support or who has failed to comply with a subpoena relating to paternity or child support proceedings holds or has applied for a professional or occupational license (under certain circumstances, a person who owes overdue child support or fails to comply with a subpoena relating to the above-stated proceedings may be subject to an order of a court, after notice and opportunity for hearing in that court, suspending, withholding or restricting the person's license).

In addition to these uses, the licensing authorities will continue their practice of using social security numbers for the following purposes:

- (1) for internal identification purposes;
- (2) to conduct criminal record checks (discovery of relevant criminal history may result in denial of your application, conditioned licensure or the filing of a disciplinary action against you);
- (3) to verify information provided by you in your application (discovery of false information in your application may result in denial of your application, conditioned licensure or the filing of a disciplinary action against you);
- (4) to verify licensure with another state's licensing authority for reciprocity licensure;
- (5) for identification purposes in national disciplinary databases (the discovery of a disciplined license in another state may result in denial of your application, conditioned licensure or the filing of a disciplinary action against you);
- (6) for test identification purposes.

## **NOTICE TO ALL APPLICANTS**

Notice to all applicants who are employees or officers or directors of a professional corporation, general business corporation or a limited liability company having the practice of architecture and/or engineering and/or land surveying and/or landscape architecture as one of its purposes. Section 327.401 of the Missouri Registration Law requires such corporations and/or limited liability companies to obtain a certificate of authority in each profession from this Board. If your corporation or limited liability company does not have a certificate of authority an application may be obtained by accessing the Board's website: <http://pr.mo.gov/apelsla>.

**STATE OF MISSOURI**MISSOURI BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS, PROFESSIONAL  
LAND SURVEYORS AND PROFESSIONAL LANDSCAPE ARCHITECTS**APPLICATION FOR LICENSURE AS A PROFESSIONAL LANDSCAPE ARCHITECT WITH A CLARB  
COUNCIL RECORD****GENERAL INFORMATION - PLEASE READ BEFORE PREPARING APPLICATION****INSTRUCTIONS**

1. ALL INFORMATION ON THIS FORM MUST BE TYPEWRITTEN
2. REFER TO INSTRUCTIONS FOR ASSISTANCE IN COMPLETING THE APPLICATION
3. ATTACH APPLICATION FILING FEE

**METHOD OF LICENSURE**I HEREBY APPLY FOR LICENSURE TO PRACTICE LANDSCAPE ARCHITECTURE BY THE  
FOLLOWING METHOD:

- ☐ 1. By Exam, based on **FIRST TIME LICENSURE IN MISSOURI:**
- Passing all Sections of the L.A.R.E. Administered by CLARB
  - Accredited Degree
  - Certified CLARB Record documenting three (3) years of satisfactory landscape architectural experience
  - \$100 filing fee - Non-refundable
  - Per Board Rule 20 CSR 2030-5.160, all applicants shall submit proof of receiving a passing score of 80% on the required State Exam covering Chapter 327, RSMo, the Board Rules and Ethics. To take the exam, please click here: <https://pr.mo.gov/apelsla-exam.asp>
- ☐ 2. By **COMITY**, based on **LICENSURE IN ANOTHER STATE:**
- Certified CLARB Record
  - \$200 Filing Fee - Non-refundable
  - Per Board Rule 20 CSR 2030-5.160, all applicants shall submit proof of receiving a passing score of 80% on the required State Exam covering Chapter 327, RSMo, the Board Rules and Ethics. To take the exam, please click here: <https://pr.mo.gov/apelsla-exam.asp>

Applicant must insert a photograph taken within  
the last 5 years. This application will not be filed  
unless your photograph is inserted in this space.Use bust photo approximately 2 1/2 x 3 inches,  
with signature across bottom of photo.**GENERAL INFORMATION INDICATE "CONTACT AT" ADDRESS BY CHECKING ONE OF THE BOXES BELOW**

FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	MAIDEN NAME	SOCIAL SECURITY NUMBER
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**PREFERRED NAME FOR LICENSURE DOCUMENTS AND SEAL**

RESIDENCE ADDRESS AS LISTED WITH THE U.S. POST OFFICE	APT.#	CITY	STATE	ZIP CODE	HOME TELEPHONE NO.
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BUSINESS (EMPLOYMENT) NAME	BUSINESS ADDRESS AS LISTED WITH THE U.S. POST OFFICE
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CITY	STATE	ZIP CODE	BUSINESS TELEPHONE NO.
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BIRTHPLACE (CITY & STATE)	DATE OF BIRTH	CITIZENSHIP	E-MAIL ADDRESS
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**LICENSURE IN OTHER STATES**

Below list all licenses/registration or certifications as a professional landscape architect you currently hold. Please attach additional information if needed.

STATE	DATE OF LICENSURE	LICENSURE NUMBER	HOW LICENSED (WRITTEN EXAM, ORAL EXAM, RECIPROCITY, GRANDFATHER, EXPERIENCE, OTHER)

**RECORD OF CHARGES, CONVICTIONS AND FINES IMPOSED ON APPLICANT**

Have you been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of this or any other state or of the United States whether or not sentence was imposed including suspended imposition of sentence, suspended execution of sentence and misdemeanor charges? If "YES", please submit a copy of the charges, findings, and order with this application.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
In any other licensing jurisdiction, have you been the subject of disciplinary action, or entered into any type of settlement agreement, provided for any limitation on your ability to practice, or monetary penalty or payment of costs? If "YES", please submit a copy of the charges, findings, and order with this application.	<input type="checkbox"/>	<input type="checkbox"/>

Pursuant to Section 324.010 RSMo:

- ☐ CHECK THIS BOX ONLY IF IN ALL OF THE LAST 3 YEARS: YOU WERE NOT A MISSOURI RESIDENT, YOU DID NOT HAVE ANY MISSOURI INCOME, AND YOU ARE NOT SUBJECT TO ANY TYPE OF MISSOURI INCOME TAX.

*False statements are subject to criminal penalties and/or license discipline.**If you have any questions regarding taxes contact the Department of Revenue at 573-751-7200 or e-mail [income@dor.mo.gov](mailto:income@dor.mo.gov).*

FOR BOARD USE ONLY	CHECK DATE	CHECK NUMBER	AMOUNT
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AFFIDAVIT

Prior to licensure, I will not engage in any landscape architecture work in Missouri, except such as may be within the exemptions of the law, or under the direction of a licensed Professional Landscape Architect in good standing and authorized to practice landscape architecture in Missouri.

I hereby make, and promise to keep, the following pledge while retaining the status of a Professional Landscape Architect in the state of Missouri to wit:

- (a) I will obey the Constitution and laws of the United States of America, the Constitution and the laws of the state of Missouri, and the rules and regulations of the Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Professional Landscape Architects;
- (b) I will discharge with diligence and fidelity the obligation of every professional employment in which I may engage within the state of Missouri or elsewhere;

I, the undersigned applicant for licensure by the Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Professional Landscape Architects as a PROFESSIONAL LANDSCAPE ARCHITECT, on my oath, or affirmation, and for the purpose of securing such licensure, declare that the statements and representations made in the foregoing application are true.

APPLICANT SIGNATURE	DATE
	